

# Alcohol screening questionnaire (AUDIT)

Drinking alcohol can affect your health and some medications you may take. Please help us provide you with the best medical care by answering the questions below.

Patient name: \_\_\_\_\_

Date of birth: \_\_\_\_\_

One drink equals:



12 oz.  
beer



5 oz.  
wine



1.5 oz.  
liquor  
(one shot)

1. How often do you have a drink containing alcohol?	Never	Monthly or less	2 - 4 times a month	2 - 3 times a week	4 or more times a week
2. How many drinks containing alcohol do you have on a typical day when you are drinking?	0 - 2	3 or 4	5 or 6	7 - 9	10 or more
3. How often do you have six or more drinks on one occasion?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily
4. How often during the last year have you found that you were not able to stop drinking once you had started?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily
5. How often during the last year have you failed to do what was normally expected of you because of drinking?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily
6. How often during the last year have you needed a first drink in the morning to get yourself going after a heavy drinking session?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily
7. How often during the last year have you had a feeling of guilt or remorse after drinking?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily
8. How often during the last year have you been unable to remember what happened the night before because of your drinking?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily
9. Have you or someone else been injured because of your drinking?	No		Yes, but not in the last year		Yes, in the last year
10. Has a relative, friend, doctor, or other health care worker been concerned about your drinking or suggested you cut down?	No		Yes, but not in the last year		Yes, in the last year

0 1 2 3 4

Have you ever been in treatment for an alcohol problem? ☐ Never ☐ Currently ☐ In the past

I II III IV  
0-3 4-9 10-13 14+

(For the Provider)

### Scoring and interpreting the AUDIT:

1. Each response has a score ranging from 0 to 4. All response scores are added for a total score.
2. The total score correlates with a zone of use, which can be circled on the bottom left corner.

Score	Zone	Explanation	Action
0-3	I – Low Risk	Patient NOT at risk for health or social complications based on alcohol use	Positive Health Message – describe low risk levels
4-9	II – Risky	Alcohol use likely leads to new health problems or makes existing ones worse	Brief intervention to reduce use
10-13	III – Harmful	Patient has experienced repeated negative consequences & continues to use despite persistent problems	Brief Intervention to reduce or abstain (Brief Treatment if available) and specific follow-up appointment
14+	IV – Severe	Patient is experiencing multiple signs of substance use disorder, needs further assessment by substance use disorder specialist	Brief Intervention to accept referral to specialist treatment for assessment

**Positive Health Message:** An opportunity to educate patients about low-risk consumption levels and the risks of excessive alcohol use.

**Brief Intervention (BI) to Reduce Use:** Patient-centered discussion that employs Motivational Interviewing concepts to raise an individual's awareness of his/her substance use and enhance his/her motivation to change behavior. Brief interventions are typically 5-15 minutes, and should occur in the same session as the initial screening. Repeated sessions are more effective than a one-time intervention. The recommended behavior change is to cut back to low-risk drinking levels unless there are other medical reasons to abstain (liver damage, pregnancy, medication contraindications, etc.).

**Brief intervention to reduce or abstain (Brief Treatment if available) & Follow-up:** Patients with numerous or serious negative consequences from their drinking, or patients with likely dependence who cannot or will not obtain specialized treatment, should receive more numerous and intensive BI's with follow up. The recommended behavior change is to cut back to low-risk drinking levels or abstain from use. Brief treatment is 1 to 5 sessions, each 15-60 minutes. Refer for brief treatment if available. If brief treatment is not available, secure follow-up in 2-4 weeks.

**BI to Accept Referral:** A proactive process that facilitates access to specialized care for individuals. These patients are referred to substance use disorder treatment experts for diagnostic assessment and, if warranted, treatment. The recommended behavior change is to abstain from use and accept the referral.

More resources: [www.sbirtoregon.org](http://www.sbirtoregon.org)

\* Johnson J, Lee A, Vinson D, Seale P. "Use of AUDIT-Based Measures to Identify Unhealthy Alcohol Use and Alcohol Dependence in Primary Care: A Validation Study." Alcohol Clin Exp Res, Vol 37, No S1, 2013: pp E253–E259